

SES APPLICATION**Part B****PROVIDER SERVICE SUMMARY**

(This information will be available to parents and local school districts)

PROVIDER INFORMATION

NAME OF PROVIDER:

School Service Systems

MAILING ADDRESS:

1011 S. Lewis Ave.

CITY:

Lombard

STATE:

IL

ZIP CODE:

60148

PHONE NUMBER:

630-916-8556

FAX NUMBER:

630-916-8556

E-MAIL ADDRESS:

rlee1_sss@yahoo.com**PRIMARY CONTACT INFORMATION**

NAME:

Robert Lee

PHONE NUMBER:

619-698-6008

E-MAIL ADDRESS

rlee1_sss@yahoo.com**SERVICES****Provider status:**

- ☒ For-profit organization
☐ Non-profit organization
☐ Faith-based organization

- ☐ School district
☐ School building
☐ Individual
☐ Other: _____

Areas to be served by provider:

- ☒ All school districts in Missouri
☐ Specific districts or counties. Please list: _____

Number of sessions per week: 2-3**Minimum/maximum numbers:**Minimum number of students required before offering services: 5Maximum number of students to be served at a session: 20**Cost per session:****Proposed location of service delivery:**

- ☒ Student's school site
☒ Provider site
☐ Other: _____

If service delivery is not at the student's school, is transportation provided? If so, is there a separate fee?
(Note: Districts are not required to provide or pay for transportation).

No Transportation

Certification of instructors:

- ☒ Baccalaureate degree in education
☐ Baccalaureate degree in related field of instruction. Please list related field(s): _____
☒ Reading Specialist
☒ Other: para-professional – Title 1 qualified

Additional education and/or experience:

- ☐ Masters level degrees or above in either reading or mathematics
☒ Missouri teacher certificated/licensed teachers
☒ Experience teaching students with specific disabilities
☒ Experience teaching LEP students
☒ Ability to speak languages other than English. Please list: Spanish
☐ Other: _____

Tutoring subjects available:

☒ Reading ☒ Writing ☒ Math

Grade Levels Served:

☒ K-2 ☒ 3-5 ☒ 6-8 ☒ 9-12

Title or description of tutoring curriculum utilized: Achieve3000, KidBiz, Tennbiz, Supplemental basal Math

Time of Service:

☒ Before School
☒ After School
☐ Weekends
☐ Summer
☐ Other: _____

Mode of Instructional Delivery:

☒ Individual Tutoring
☒ Small Group Instruction (2 to 8 students)
☒ Large Group Instruction (9-25 students)
☒ On-Line/Web-based
☐ Other: _____

Specifics of reporting to parents & school (check all that apply):**Method:**

☒ letters
☒ phone calls
☒ conference with parents
☐ conference with parents & school
☒ other: on line

Frequency:

☒ weekly
☐ bi-monthly
☐ monthly
☐ other: _____